

**THIS FORM MUST BE KEPT CONFIDENTIAL**

Debora Townsend (Pro-Per, Plaintiff-Victim)  
P.O. Box 391291  
Mountain View CA 94039  
Tel 650.965.7092

**FILED**

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RICHARD W. WIEKING  
CLERK  
U.S. DISTRICT COURT  
N.D. DIST. OF CA. S.J.

**UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA**

280 No. First Street, San Jose CA 95113

Civil Action. Docket No.: # \_\_\_\_\_ /

District Judge Initials: \_\_\_\_\_

**C07 05714 PVT**

DEBORA TOWNSEND,  
Plaintiff (and Appellant),

vs.

WHOLE FOODS MARKET,  
Defendant.  
(Alan Trock, attorney)

**APPLICATION TO PROCEED  
IN FORMA PAUPERIS (Civil)**

Declaration of Debora Townsend.

(Calif. Supreme Court #S155629 / Calif. Court of Appeal-Sixth Appellate District  
#H031711 / San Jose Superior Court #1-05-CV-053182. Appeal From A Summary  
Judgment of The Superior Court of California, County of Santa Clara; The Honorable Neal  
A. Cabrinha, Judge. Participating: Hon. Cabrinha, Hon. Manoukian, Hon. Elfving).

I, Debora Townsend, declare, under penalty of perjury that I am the plaintiff in the  
above entitled case and that the information I offer throughout this application is true and  
correct. I offer this application and declaration in support of my request to proceed without  
being required to prepay the full amount of feed, costs or give security. I state that because  
of my proverty that I am unable to pay the costs of this action or give security, and that  
I believe that I am entitled to relief. I was defrauded.

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APPLICATION TO PROCEED IN FORMA PAUPERIS (CIVIL), CONTD  
DECLARATION OF DEBORA TOWNSEND

I, Debora Townsend, swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the fees or costs. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct.

I, Debora Townsend, declare under penalty of perjury the following herein to be true and accurate. I am the personal injury victim Plaintiff in the case of *Debora Townsend vs. Whole Foods Market*.

I, Debora Townsend (dob 10/10/1951; single), am a resident of Mountain View California in Santa Clara County in the State of California declare under penalty of perjury the following herein to be true and accurate.

I need to please request waiver of all fees and all costs due to presently having no income. This is due to serious crimes against myself and my business which have all been previously reported to Mountain View Police at 1000 Villa Street Mountain View CA 94041 and the District Attorney of Santa Clara County in San Jose CA. Because of these crimes, my company owes me back income due that I have not yet received and anticipate receiving in full once the Authorities have resolved these crimes which were reported and I receive restitution.

In the meantime, I have no income.



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APPLICATION TO PROCEED IN FORMA PAUPERIS (CIVIL), CONTD  
DECLARATION OF DEBORA TOWNSEND

My mailing address is: P.O. Box 391291 Mountain View CA 94039.

Tel: 650.965.7092. My occupation: Marketing Manager.

My employer: Amenities Unlimited, P.O. Box 391291 Mountain View CA 94039.

In addition to this serious business crime situation, I have also suffered huge economic loss of income from the Whole Foods Market physical personal injury severe parasites & bacterial infections foodborne illness being laid up for months, plus have had to pay out of pocket thousands & thousands of dollars for medical healthcare treatment over a long period of years to eradicate the Whole Foods Market foodborne illness. Plus even more additional economic losses and hardship to date because Whole Foods Market dragged out litigation through entire 2006 last year and then engaged in acts defrauding me which has delayed my receiving relief. The entire year of 2007 has been spent battling for justice to get my due relief of which I was defrauded.

Consequently due to all these crimes, and the Whole Foods Market physical personal injury severe parasites & bacterial infections foodborne illness which have all put tremendous financial hardship on me, at this current time, I am not able to pay for necessities of life because of all the crime-related problems caused by others, expenses and bills. Friends are currently financially supporting me and have been paying my rent medicine food insurance living expenses.

*(Signature)*

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APPLICATION TO PROCEED IN FORMA PAUPERIS (CIVIL), CONTD  
DECLARATION OF DEBORA TOWNSEND

I do not qualify for unemployment benefits. And I was denied Social Services benefits because I cannot work fulltime due to disabilities.

All of this has had a devastating catastrophic disastrous effect and impact on me and my life.

This statement of poverty is true. This action is not frivolous or malicious. This action states a claim on which relief should be granted. Such monetary relief from defendant is legally allowed and permitted by law.

I declare under penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

Executed on this date 11/09/2007 at Mountain View California. Thank you.

Sincerely,



Debora Townsend  
Declarant, Plaintiff-Victim